ANDOVER VETERANS

ID Card Application

	Name:
	Address: Andover, MA 01810
	SSN: DOB:
	Email:
	Phone:
	Branch of Service:
	Current Status: □ Veteran □ Active Duty □ Reserves □ National Guard
Can the Veterans' Services Office send you flyers and other correspondence on events related to Veterans that are going on in the area? Yes No Yes, would you prefer correspondence via email or mail? Email Mail	
If Yes, what type o	of volunteering would you be able / like to do?
□ Landscapi	ing / Mowing Yards
□ Snow Ren	noval
□ Simple Ho	ome Repairs, Example:
	Home Repairs, Example:
□ House Cle	eaning
□ Transport	tation to Doctor Appointments
□ Transport	tation for Grocery Shopping / Other Shopping
□ Hospice	
□ Other	
Signature	Date
	Official Use ONLY:
□ Discharge	e: Honorable or Under Honorable Conditions Active / Reserves / NG Residency Verified
	Issuer: Date Issued: